NAME (LAST)	FIRST) (M.I)	
MCCANN JOHN E		
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EMPLOYE NO.	SOCIAL SECURITY NO.	
DATE OF BIRTH	DATE OF APPOINTMENT	
DAY) (MONTH) (YEAR	(DAY) (MONTH) (YEAR)	
1943	14 SEPTEMBER 1970	
		S. Commission
DATE OF PHOTOGRAPH:		517052
JANUARY 1974	•	

CPD = 62,328 (12/73)

PERSONNEL PHOTOGRAPH/CHICAGO POLICE

Date 7 100 / 91

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## ACKNOWLEDGEMENT OF RESPONSIBILITY

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Signature	
Print Name John	MECANN
SS#	Unit 620

TATE OF ILLINOIS County of Cook CITY OF CHICAGO

STAR 15/16 office of PATROLMAN having been appointed to the do solemnly swear that I will support the Constitution of the United States, and the Constitution of the State of Illinois, and that I will faithfully discharge the duties of the office of such, according to the best of my ability. ubscribed and sworn to before me, this SIGNATURE

4/16 JPD-PERS. 14,252

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Resignations for Department members have been processed as follows:

Name	Empl.#	<u>Title</u>	Unit/Detail	Effective Date
BEARD, Samuel L.		Crossing Guard	007	27 Feb 2004
CZARNY, Sherry A.		Crossing Guard	LOA	15 Jan 2004
LUNDGREN, Mark A.		Police Officer	LOA	23 Feb 2004
MC CANN, John E.		Detective	620	15 Mar 2004
MC PHILIMY, Patrick M.		Dir. of Grants Mgt.	127	19 Mar 2004
MOKSTAD, William A.		Police Officer	050	03 Mar 2004
MYERS, Miles D.		Police Officer	050	15 Mar 2004
O CONNOR, Terrence W.		Detective	630	15 Mar 2004
OHSE, Rory J.		Police Officer	022	03 Mar 2004
PODALSKI, Kenneth		Police Officer	057	15 Mar 2004
ROBINSON, Richard J.		Police Agent	121	15 Mar 2004
RODE, James M.		Explosive Canine Handler	050	15 Mar 2004
SHANNON, Laretta		Police Officer	021	29 Feb 2004
TAPKOWSKI, Dana		Police Officer	017	20 Feb 2004
TUNNEY, Michael J.		Police Officer	008	05 Mar 2004
VIOLA, James A.		Police Officer	146	27 Feb 2004
WOLBERG, Daniel A.	•	Investigator II OPS	113	28 Feb 2004

Philip J. Cline Superintendent of Police

Authenticated:

DISTRIBUTION: E

PERSONNEL ORDER NO. 2004-054 "B" SERIES EMPLOYMENT

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Name (Print)	COMPLETE ONL'	Y IF EMPLOYEE IS LEAVING CITY	SERVICE	DATE	3 4 2
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-			"VOLUNTARY		
Detective Title		01 Other employment	06   Retirement	11	Dissatisfaction with:    Working Conditions
		02  AWOL - No reason Given 03  Family Responsibilities	07 ☐ Marriage 08 ☐ Maternity	12	Promotional opportunity
Chicago Poláce Dept Employing Department	1180	04 🗆 Return to School 05 🗆 Military service	09   Relocation	14	☐ Compensation ☐ Hours
	60655		10 🛘 Leave of Abse	nce-Personal 15 (	☐ Supervision
Home Address	Zip	□ Other			
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Starting Date Last Day		© ☐ Violation of City Personnel aragraph, as noted;	Rule	, Section	,
	ayroil	5 Discontinuation of Function			
Salary at time of seperation \$ 6,245.50	100. 5	6 G Reduction in Force 7 G Lay Off - Seasonal			
Vacation Pay after Last Day Worked, if any		B Compulsory Retirement  Other			
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lame of immediate Supervisor	Telephone No.	Former CETA emp	ployee? ☐ Yes	□ No	
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PERSONNEL ACTION CHICAGO POLICE DEPART	TMENT						21 Jan	04		1
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City of Chicago Richard M. Daley, Mayor

#### Board of Ethics

Dorothy J. Eng Executive Director

Darryl L. DePriest Chair

Eileen T. Corcoran Michael F. Quirk Mary Beth S. Robinson Miguel A. Ruiz Joseph E. Samson

Suite 500 740 North Sedgwick Street Chicago, Illinois 60610 (312) 744-9660 (312) 744-2793 (FAX) (312) 744-5996 (TTY)

http://www.cityofchicago.org

## NOTICE TO CITY EMPLOYEES OF CITY ETHICS RULES CONCERNING POST-CITY EMPLOYMENT

The Governmental Ethics Ordinance, Chapter 2-156 of the Municipal Code of Chicago, contains post-employment restrictions that apply to all former employees of the City.

For example, as a former employee of the City, you are required to comply with section 2-156-070, entitled "Use or Disclosure of Confidential Information," and section 2-156-100, entitled "Post-Employment Restrictions."

This summary outlines some of the restrictions that apply once you leave City service. To the extent this summary differs from the language of the Ordinance, the language of the Ordinance is controlling.

The post-employment restrictions are:

- 1. You are permanently prohibited from using or disclosing confidential information gained in the course of, or by reason of, your position with the City.
- 2. For one year after leaving City service, you cannot assist or represent\* any person other than the City in any business transaction involving the City, if you participated personally and substantially in the subject matter of the transaction during City service.
  - \*Assist or represent involves a wide range of activities. The term has been interpreted to mean: making appearances before City agencies on behalf of others; making telephone contact with City employees and officials on behalf of others; signing or submitting proposals, contracts or other documents to City agencies; making contact with employees or officials on behalf of others; as well as acting as a spokesperson for another, or seeking to communicate and promote the interests of one party to another.





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- 3. You are permanently prohibited from assisting or representing any person other than the City on any contracts over which you exercised contract management authority\* during your City service.
  - \*Contract management authority means personal involvement in or direct supervisory responsibility for the formulation or execution of a City contract. including without limitation the preparation of specifications, evaluation of bids or proposals, negotiation of contract terms or supervision of performance.
- 4. You are permanently prohibited from assisting or representing any person other than the City in any judicial or administrative proceeding involving the City, if during your City service:
  - (a) you were counsel of record; or
  - (b) you participated personally and substantially in the proceeding.

Please note that these restrictions do not prohibit you from accepting employment with anyone; however, they may restrict what you can do in your new employment.

Every City contract must include a provision that requires compliance with Chicago's Governmental Ethics Ordinance. Therefore, if your new employer has an interest in matters involving the City, it is imperative that you and your employer understand what, if any, post-employment restrictions apply to you.

This summary is only an overview intended to help current and former City employees develop a basic understanding of their responsibilities under the Ordinance. For authoritative guidance on specific questions, consultation with the Board of Ethics is recommended. The Board will maintain the confidentiality requirements of the Ordinance. For assistance, call (312) 744-9660.

#### **ACKNOWLEDGMENT BY EMPLOYEE**

I hereby acknowledge:

1. that I received a copy of the foregoing "NOTICE TO CITY EMPLOYEES OF CITY ETHICS RULES CONCERNING POST-CITY EMPLOYMENT "; and

2. that I understand that I can view and download the complete text of the City's Governmental Ethics Ordinance by accessing the website of the Board of Ethics at www.cityofchicago.org/Ethics/.

Signature:

Name:

John E. MCCANN

Date: 9 MAR 04

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12/02

Page 2 of 2



15 MARZ 04 Vacate



City of Chicago Richard M. Daley, Mayor

**Board of Ethics** 

Dorothy J. Eng Executive Director

Darryl L. DePriest Chair

Eileen T. Corcoran Michael F. Quirk Mary Beth S. Robinson Miguel A. Ruiz Joseph E. Samson

Suite 500 740 North Sedgwick Street Chicago, Illinois 60610 (312) 744-9660 (312) 744-2793 (FAX) (312) 744-5996 (TTY)

http://www.cityofchicago.org

# NOTICE TO CITY EMPLOYEES OF CITY ETHICS RULES CONCERNING POST-CITY EMPLOYMENT

The Governmental Ethics Ordinance, Chapter 2-156 of the Municipal Code of Chicago, contains post-employment restrictions that apply to all former employees of the City.

For example, as a former employee of the City, you are required to comply with section 2-156-070, entitled "Use or Disclosure of Confidential Information," and section 2-156-100, entitled "Post-Employment Restrictions."

This summary outlines some of the restrictions that apply once you leave City service. To the extent this summary differs from the language of the Ordinance, the language of the Ordinance is controlling.

The post-employment restrictions are:

- 1. You are permanently prohibited from using or disclosing confidential information gained in the course of, or by reason of, your position with the City.
- 2. For one year after leaving City service, you cannot assist or represent\* any person other than the City in any business transaction involving the City, if you participated personally and substantially in the subject matter of the transaction during City service.
  - \*Assist or represent involves a wide range of activities. The term has been interpreted to mean: making appearances before City agencies on behalf of others; making telephone contact with City employees and officials on behalf of others; signing or submitting proposals, contracts or other documents to City agencies; making contact with employees or officials on behalf of others; as well as acting as a spokesperson for another, or seeking to communicate and promote the interests of one party to another.





- 3. You are permanently prohibited from assisting or representing any person other than the City on any contracts over which you exercised contract management authority\* during your City service.
  - \*Contract management authority means personal involvement in or direct supervisory responsibility for the formulation or execution of a City contract, including without limitation the preparation of specifications, evaluation of bids or proposals, negotiation of contract terms or supervision of performance.
- 4. You are permanently prohibited from assisting or representing any person other than the City in any judicial or administrative proceeding involving the City, if during your City service:
  - (a) you were counsel of record; or
  - (b) you participated personally and substantially in the proceeding.

Please note that these restrictions do not prohibit you from accepting employment with anyone; however, they may restrict what you can do in your new employment.

Every City contract must include a provision that requires compliance with Chicago's Governmental Ethics Ordinance. Therefore, if your new employer has an interest in matters involving the City, it is imperative that you and your employer understand what, if any, post-employment restrictions apply to you.

This summary is only an overview intended to help current and former City employees develop a basic understanding of their responsibilities under the Ordinance. For authoritative guidance on specific questions, consultation with the Board of Ethics is recommended. The Board will maintain the confidentiality requirements of the Ordinance. For assistance, call (312) 744-9660.

#### ACKNOWLEDGMENT BY EMPLOYEE

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1. that I received a copy of the foregoing "NOTICE TO CITY EMPLOYEES OF CITY ETHICS RULES CONCERNING POST-CITY EMPLOYMENT"; and

2. that I understand that I can view and download the complete text of the City's Governmental Ethics Ordinance by accessing the website of the Board of Ethics at <a href="https://www.cityofchicago.org/Ethics/">www.cityofchicago.org/Ethics/</a>.

Signature

Mama:

Date: Ach 11, 2004

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12/02

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## City of Chicago Employee Change of Address Form

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Department _	Police Department	Bureau	
NameMcCar	nn, John E.		
Position title_	Detective		
Social Security	number		
		s a condition of employment	with the City o
Chicago I must	be an actual resident of the (	City of Chicago.	
		<u> </u>	
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New Address	<u> </u>	Zip Code	60655
Effective Date _	5 Aug 96		
New Phone Nun			
164 LUOUE 1400	iber	-	
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	Signed	<u>:</u>	
	Signed	<u>:</u>	
		11 AUC 96	
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Complete and sign two copies.
First copy to departmental file.
Second copy to Department of Personnel.

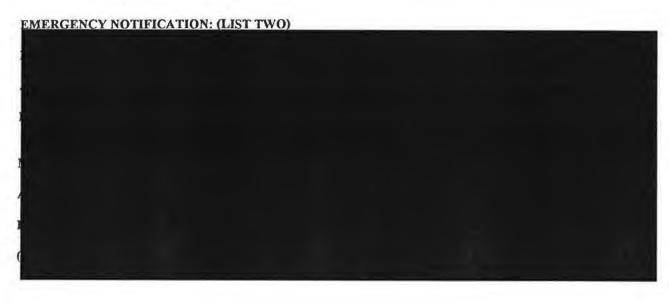
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STATE OF ILLINOIS ) COUNTY OF COOK )

the time he/she shall be such Deputy, I h my name to persons who sign compla appearances of witnesses regarding said Section 11.501.1 of the Illinois Motor	it Court of Cook County, Illinois by virtue of the power and the laws of the State of Illinois, hereby appoint a Deputy Clerk of said Court and during the authorize and empower him/her only to administer oaths in the violations of laws, to execute subpoenas requiring the violations, take sworn statements from arresting officers under Vehicle Code, to administer oaths to persons who execute bail behalf of the Clerk, complaints for ordinance violations where no
	Given under my hand . JAN 11, 2061
	DOLTHY BROWN
	Clerk of the Circuit Court of Cook County, Illinois
	By Deputy Clerk
does hereby accept the appointment as a coaths to persons who sign complaints appearances of witnesses regarding said Section 11.501.1 of the Illinois Motor bonds as surety, accept and file, on behalf	Officer's Signature
-	By Whom Employed
STATE OF ILLINOIS )	By Whom Employed .
State of Illinois and that I will faithfully d Court of Cook County, Illinois to the best	he Constitution of the United States and the Constitution of the lischarge the duties of the Office of a Deputy Clerk of the Circuit of my ability.  Officer's Signature  John McCANN Def 2046/ Please Print) Officer's Name Rank Star No.
) SIGNED AND SWORN to before me	Please Printy Officer's Name Rank Star No.
Clerk of the Circuit Court of Cook County  Depu	

### PERSONNEL INFORMATION SHEET

NAME MC CANN, John E.		STAR# 20461 RANK Det.
ADDRESS		_PHONE# <sup>7</sup>
<b>DIST OF RES</b> : 022 <b>ZIP</b> 60655	PAGER#	
DRIVER'S LICENSE#	EXP.	01 Dec 99
EMPLOYEE#	SOC SEC#	
DATE OF BIRTH 43	DATE OF APPOI	NTMENT 14 Sep 70
DET'S LOCKER ROOM: LOCKER	¥ 176	
005TR DISTRICT LOCKER ROOM: 1	LOCKER# 553 482 LOC	(PATROLMEN,PATROLWOMEN,SGT)  CATION
SAFETY VEST#0540333	HELMET#_	70-232
PRIMARY WEAPON(S): MAKESmith & We	MODEL 19-3	SER
CITY FIREARM REGISTRATION#_		DATE REG 09 Feb 83
SECONDARY WEAPON(S): MAKE	MODEL	SER
CITY FIREARM REISTRATION#		DATE REG
F.O.I.D. CARD#	SEMI-AUTO CAR	RD#



- Be cognizant of the tone of E-Mail messages. Sarcasm may be interpreted as 5.5 hostility.
  - 5.6 Use common courtesies that would be extended in letter correspondence.
  - Do not use all capital letters, since this is tantamount to "yelling" on the Internet. 5.7

## Confidentiality, Monitoring and Enforcement

- Users may not share Internet or E-Mail access with anyone unless authorized to do so, and may not disclose the contents or existence of City computer files, E-Mail, or other information to anyone other than authorized recipients.
- Users do not have a personal privacy interest in anything created, received, or stored on City Internet or E-Mail systems.
- The City of Chicago has the right to monitor Internet and E-Mail use to ensure that these resources are being used for business purposes only, consistent with this Policy.
- Inappropriate use of City Internet or E-Mail resources, in violation of this Policy, will subject the user to corrective action consistent with the City of Chicago Personnel Rules, Police Board Rules, or other applicable policies and procedures, which may range from suspension of Internet and E-Mail access privileges up to and including discharge, or may affect contractual relationships.

#### 7. INTERNET AND E-MAIL COMPLIANCE STATEMENT

I have read and understand the above City of Chicago Internet and Electronic Mail Use Policy, and acknowledge that any use of City Internet or E-Mail resources in violation of this Policy will subject me to corrective action consistent with the City of Chicago Personnel Rules, Police Board Rules, or other applicable policies and procedures, which may range from suspension of Internet and E-Mail access privileges up to and including discharge, or may affect contractual relations.

Signature of Licer Signature of Supervisor

Name of Person Making Designation of Beneficiary:	MCCANN,	John	E.
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### DESIGNATION OF BENEFICIARY

In accordance with the provisions of the "Law Enforcement Officers, Civil Defense Workers, Civil Air Patrol Members, Paramedics, Firemen, Chaplains, and State Employees Compensation Act," 820 ILCS 315/1 et. seq., I hereby designate the following person or persons as beneficiary or beneficiaries, in the event that compensation benefits are payable if I am killed in the line of duty:

Complete name and address	Relationship,	Percentage Shares:
of each beneficiary:	if any:	
Print name (first, middle, last) of pers	on making designation of beneficia	ary:
THE IMMEDIATION PROPERTY.		,
Address:		
Date of Birth: 43	Social Security Number	
Place of Employment under the Act:	CHICAGO POLICE DE	EPARTMENT
Address: 1121 S, STATE STRI	EET, CHICAGO, ILLINOIS 606	505
Signature of Witness:	Signature of person making de	esignation of beneficiary:
0	0	
Address of Witness:		
	Date: 04 Dec 98	3

<sup>\*</sup>Effective January 1, 1996, the beneficiary compensation amount is \$100,000.00

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MARITAL_SING			VORCED [] DA		WIDOWED	
EDUCATION	GRADE ECHOOL HIGH SCHOOL COLLEGE OTHER	YEARS YEARS		FRADO-TE YES A. NO GRADUATE YES NO GRADUATE NO	A. C. MAJOR	V. DEGREE Y
ILITARY SER	VICE:		T O B O			++
DATE	TYPE	SEPARA REINSTATEMENT DATE	DATE	ТҮІ	P E	REINSTATEME
OTIFY IN MERGENCY						
ATE OF POBY, APPIT. ATE OF CULAR APPIT.	9-14-70	DATE OF TEMPORARY APP'T				
V LAST NAME	FIRST NAI	ME MIDDLE NAME		STAR NO		EMPLOYEE NO.
McCann	John	Edward	812	7 15116 6	250	

## Residency Affidavit

## City of Chicago

Bureau	A/3 Violent	Crimes
		h the
(zip co	de) 60652	<del>-</del> :
	dition of e	Bureau

I understand that the falsification of this statement of address shall constitute grounds for discharge from the City Service.

I understand and acknowledge that I must report any change of address immediately to my department head and to the Department of Personnel and that failure to provide such notification shall constitute grounds for discharge from the City Service.

BY SIGNING THIS RESIDENCY AFFIDAVIT, I ACKNOWLEDGE AND REPRESENT THAT I HAVE FULLY READ AND UNDERSTAND BOTH THE FRONT AND REVERSE SIDES OF THIS RESIDENCY AFFIDAVIT, AND FURTHER CERTIFY THAT THE INFORMATION WHICH I HAVE PROVIDED HEREIN IS TRUE AND CORRECT.



Complete and sign two copies.
First copy to department file.
Second copy to Department of Personnel.

(See reverse side.)

## CITY OF CHICAGO DEPARTMENT OF PERSONNEL EMPLOYEE CHANGE OF ADDRESS

DEPARTMENT Chicago Police Dep	t. BUREAU N3. V.C.
NAME Det. John McCara #8137	
POSITION TITLE Detective	
SOCIAL SECURITY NUMBER_	
I understand and acknowledge	that as a condition of employment with
the City of Chicago I must be an	actual resident of the City of Chicago.
Old Address	(Zip Code)_60632
New Address	(Zip Code) 60652
Effective Date 1 Jul 83	
New Phone Number  I understand that the falsif	ication of this statement of address
shall constitute grounds for disc	marge from the City Service.
I understand and acknowledge	that I must report any change of address
immediately to my department head	and to the Department of Personnel and
that failure to provide such notif	ication shall constitute grounds for
discharge from the City Service.	
	Signed
	Date 12 72/83
	TRIBURET DIS
Complete and sign two copies. First copy to departmental file.	

Per-72

Second copy to Department of Personnel.

In order for a City employee to be most effective, he or she must identify with the needs and aspirations of the residents of the City of Chicago. This sense of identification can only be accomplished if the employee is, in fact, an actual resident of the City. As a City resident an employee participates directly in the activities of a neighborhood of the City. This participation and commitment is essential to the development of a strong sense of public service as it relates to the citizens of Chicago. It has been and will continue to be a requirement for City employment that all employees of the City, irrespective of status, shall be actual residents of the City of Chicago. This policy is stated in Section 25-30 of the Municipal Code of Chicago, the Rules of the Department of Personnel and other departmental rules or labor contracts governing particular classes of employees. It is essential that this policy be applied uniformly to all employees in all departments. It is the responsibility of every department head to ensure that this policy is carried out. A department head shall take immediate action for the discharge of any employee not in compliance with the requirement that he/she be an actual resident of the City of Chicago.

Any request for assistance in the implementation of this policy should be directed to the Commissioner of Personnel.

For your information, an opinion of the Corporation Counsel states in part: "...actual residence has been found to contemplate substantially the same attributes as are intended when the word 'domicile' is used, and a permanent and fixed character is intended."

"...an actual resident has been held to be one who is in a place with the intent to establish there his domicile or permanent residence."

The opinion goes on to say: "...the acquisition of a local address solely for the purpose of claiming it as a residence as a requirement of public employment must be viewed as a subterfuge designed to avoid the obvious objectives of the ordinance. What is required is that the employee actually dwell at the purported residence, not that he have a mailing address at which he may on occasion spend some minimal amount of time, while, for example, his family lives outside the city and his children attend schools outside of the city in which the employed parent purports to reside."

Most recently, the Illinois Supreme Court, in upholding the City's residency requirement, described actual residence as a person's "true, permanent home" and "principal residence [and] domicile."

(See reverse side.)

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### CITY OF CHICAGO

DEPART	MENT Ch	BUREAU PATROL		
NAME _	PTLMN	John	MECHNU	
POSITIO	N TITLE	PATROLM.	4N	
SOCIAL	SECURITY NO	. 4		

I understand and acknowledge that as a condition of employment with the City of Chicago I must be an actual resident of the City of Chicago.

My address is:	
- 2 1	
Chicago	(zip code) _ 60632

I understand that the falsification of this statement of address shall constitute grounds for discharge from the City Service.

I understand and acknowledge that I must report any change of address immediately to my department head and to the Department of Personnel and that failure to provide such notification shall constitute grounds for discharge from the City Service.

Signed

Date 37 MAY 16

Complete and sign two copies.

First copy to departmental file.

Second copy to Department of Personnel.



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# City of Chicago Employee Change of Address Form

M-Ca-	Police Department	Bureau
NameMccan	n, John E.	
	Detective	
Social Security		
Social Security	namber	
I understar Chicago I must I	nd and acknowledge that be an actual resident of the	as a condition of employment with the City of City of Chicago.
Old Address		Zip Code
lew Address		Zip Code
ffective Date _	5 Aug 96	
lew Phone Num	ber	
By signing t	this residency affidavit, I a	cknowledge and represent that I have fully read
	both the front and reverse	sides of this residency affidavit, and further cer-
nd understand	mation which I have provi	ded herein is true and correct.
nd understand	rmation which I have provi	ded herein is true and correct.
nd understand	rmation which I have provi	ded herein is true and correct.
nd understand	rmation which I have provi	ded herein is true and correct.
nd understand	rmation which I have provi	ded herein is true and correct.
nd understand fy that the info	rmation which I have provi	ded herein is true and correct.
nd understand	rmation which I have provi	ded herein is true and correct.
nd understand fy that the info	Signed	ded herein is true and correct.
nd understand fy that the info	Signed .	ded herein is true and correct.
nd understand fy that the info	rmation which I have provi	ded herein is true and correct.

Complete and sign two copies.
First copy to departmental file.
Second copy to Department of Personnel.

#### NOTICE TO EMPLOYEES - ETHICS RULES

All employees of the City of Chicago owe their primary business/employment loyalty to the city and its citizens. In addition to the obligation to perform duties in a satisfactory manner, there are various ethical restrictions and obligations imposed by the City. Violation of these restrictions and obligations may result in discipline, up to and including discharge.

Gifts/Money. You may not accept any anonymous gift. You may not accept gifts from persons or organizations whose City business you are in a position to affect, with the exception of occasional non-cash gifts valued at less than \$50. You may not accept anything of value intended to influence official decisions or actions, or in return for advice on City business or operations. Any gifts you accept on behalf of the City must be reported promptly to the Board of Ethics.

Dual Employment. You may not use City time or City-owned property in any non-City employment or business. You may not use or reveal confidential information gained from City employment. The Chicago Police Department has the right to restrict secondary employment for good cause.

Interest in City Business. You may not take part in or influence any governmental decisions in which you have an economic interest. You may not have a financial interest, in your name or in the name of any other person, in any contract, work or business of the City. Such a financial interest can include being an employee or consultant in any City business undertaken by an immediate family member.

Property. You may not engage in or permit the unauthorized use of Cityowned property. You may not have a financial interest in the purchase of City property unless it is sold through public, competitive bidding.

Relatives. You may not hire or advocate the hiring of relatives for jobs with the City agency where you are employed. You may not supervise or involve yourself with any City contract that benefits a relative.

These obligations and restrictions are set forth in detail in Chapter 2-156 of the Municipal Code, and in the Personnel Rules of the City. This Notice is intended to describe some of the more common situations covered by the ethics rules; it is not a substitute for a review both of Chapter 2-156 and the Personnel Rules. If you have any questions about your ethical obligations, contact the City of Chicago Board of Ethics, 744-9660.

<sup>\*</sup> You must return a signed copy of this Notice to your department head.

## DESIGNATION OF BENEFICIA'"

In accordance with the provisions of the "LAW ENFORCEMENT OFFICERS, CIVIL DEFENSE WORKERS, CIVIL AIR PATROL MEMBERS, PARAMEDICS AND FIREMENT COMPENSATION ACT," I hereby designate the following as beneficiary or beneficiaries, in the event that the \$50,000 benefits are payable by reason of my death in the line of duty.

Co	omplete Name & Address of e	each Beneficiary	Relationship, if any	Percent % Share
4				
1.				
2.	Name	•		Among and compare the file file proposes and among spile file
	Address			
	City/State		•	
3.	Name			
	Address			
	City/State			
4.	Name		<b>Management</b>	
	Address			
	City/State			
Pri	nt Name (fir <mark>st, middle, l</mark>	asi): John	E. MªCAN.	N
	e Address:			
	e of Birth 43	Social Securit	v Number:	
	ce of Employment under the		No.	
			•	~~
Aaaı	ress of Employment:	1121 South Sta	ate Street, Chicago,	IL 60605
Sigr	nature of Witness:		Signature of pers	
			designating benef	fits:
2.				
Addr	ress of Witness:		(/	
	20 ORC. 83		201 1100	22

Date:

# THE LAW ENFORCEMENT CODE OF ETHICS

As a Law Enforcement Officer, my fundamental duty is to serve mankind; to safeguard lives and properly; to protect the innocent against deception; the weak against oppression of belimidation, and the personal against violence or disorder; and to respect the Constitutional rights of all men to liberty, consisty and justice.

will keep my private life unsulfied as an example to all; maintain courageous calm in the face of danger, scorp, or ridicule; develop self-restraint; and be constantly mindred of the welfare of others. Honest in thought and deed in both my personal and official life. I will be exemplery in obeying the laws of the land and the regulations of my department. Whatever I see or hear of a confidential nature or that is confided to me in my official capacity will be kept ever secret unless revelation is necessary in the performance of my duty.

will never act officiously on permit personal feelings, prejudices, animosities, or friendships to influence my decisions. With ne commemise for crime and with relentless prosecution of criminals, I will enforce the law courteously and appropriately without fear or favor, makes or ill will, never employing opnecessary force or violence and never accepting gratuities.

I recognize the badge of my office as a symbol of public faith, and I accept it as a public trust to be held so long as I am true to the ethics of the police service. I will constantly active to achieve these objectives and ideals, deficating myself before their may chosen profession—Law Enforcement.

I have read the foregoing Law Enforcement Gode of Ethics and fully understand it. I subscribe to it wholehearted and without reservation and pledge that I will abide by it the option my career as an honored and honorable mediter as the Chicago Police Danie.

(Signed)

Prot Palmin Ster No. 15/16

## Detective Division

To

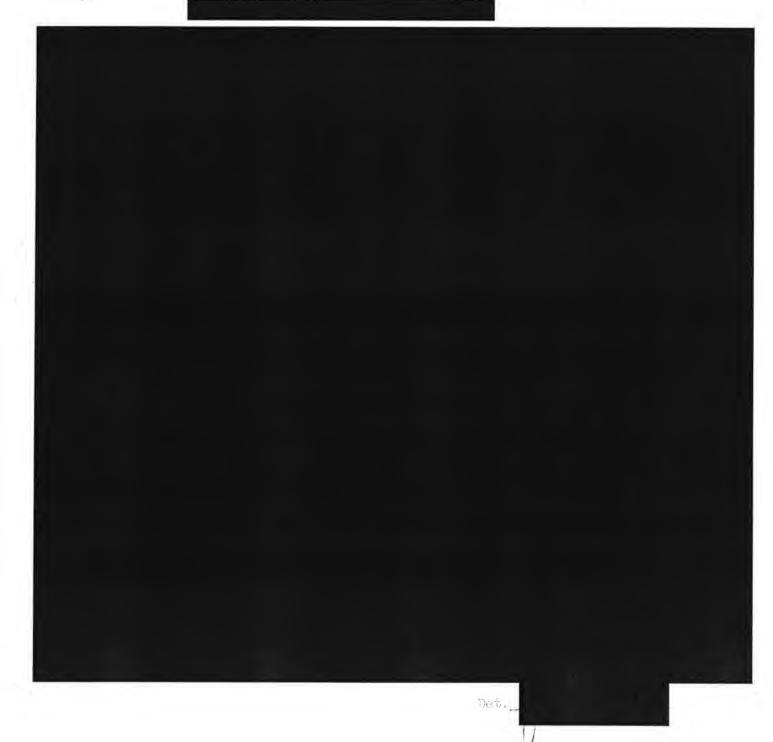
Commandiag Officer Recruit Processing Section

From

Detective J. Cooley 5461 General Assignment Area 2

Subject

Background Investigation Prob. Ptlmn. Candidate-John E. McCann



# APPLICANT QUESTIONNAIRE/CHICAGO POLICE POSTTION APPENDITION INSTRUCTIONS: Fift out this application completely and accurately. If your application is made out properly it may increase your chances of employment. All statements in your application are subject to verification. Incorrect statement (s) may bar or remove you from employment. If writing space provided is inadequate, use the continuation sheet at the end of this application and identify additional information by question number. Use the term 'DNA' ('does not apply') if the question does not apply. 2. LIST ANY OTHER NAMES, ALIASES YOU HAVE USED, OR BEEN KNOWN BY (INCLUDE MAIDEN NAME, IF APPLICABLE.) 1. NAME (LAST) (FIRST) (MIDDLE) MECANN 11016 IOLN 5. SUCIAL SECURITY NO 4. HOME PHONE BROWINI M 6 FT HICHEO BIRTHMARKS, BLEMISHES, DEFORMITIES, AMPUTATIONS, TATOOS, ETC., THAT YOU MAY HAVE. TO ARE YOU A U.S CITIZEN IF "YES" IF "NATURALIZED" GIVE PARTICULARS NQ YES X NATIVE BORN NATURALIZED MEDICAL HISTORY

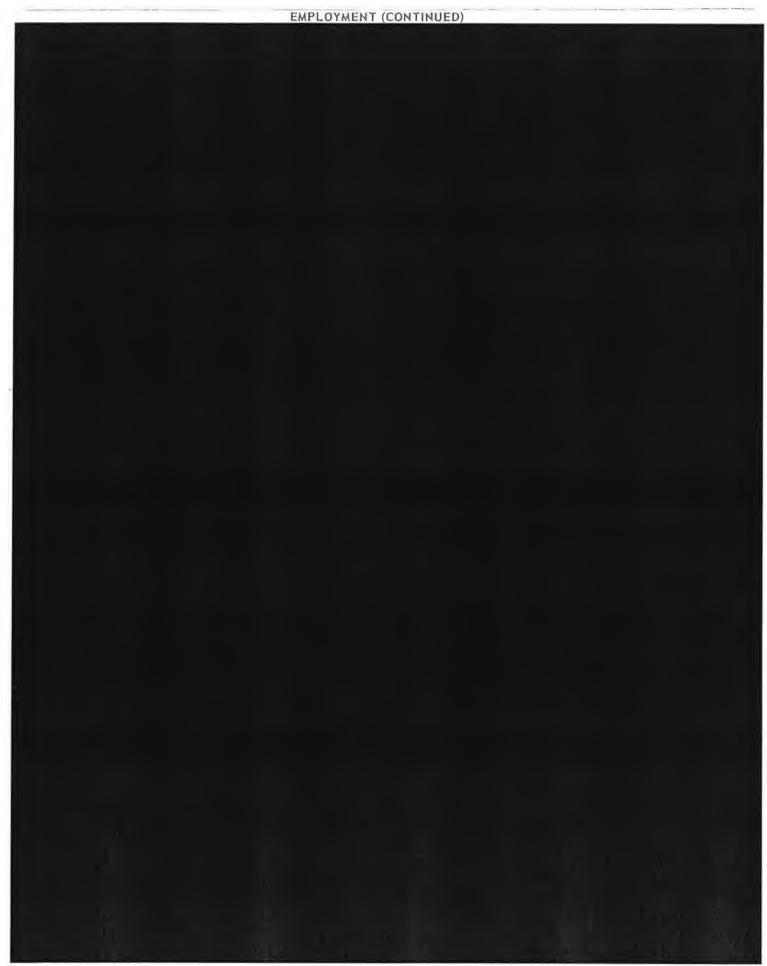




DS. IF YOU HAD NO MILITARY SERVICE EXPLAIN







## CONTINUATION SHEET

QUESTION		er of the question you are answering, then complete your answer in the space provided
NUMBER		CONTINUATION OF ANSWER
	E.	
		,
	6	
		6
-		
GNATURE		DATE

## TO WHOM IT MAY CONCERN:

I respectfully request that you forward to the Chicago Police Department any and all information that you may have concerning me, my work record, or my reputation. Also please give any information that may appear in my personnel file. This information is to be used to determine my qualifications and fitness for the position I am seeking with the Chicago Police Department.

I hereby release you and/or your employer from any liability and damage of whatsoever nature on account of furnishing the information requested above.

Signature

Date -

#### EX. ANATION OF TERMS

TYPE OF DUTY PERFORMED: For example, squadrol or car patrol duty while under the supervision of the rating supervising sergeant.

#### PERFORMANCE TRAITS:

- 1. PERSONAL NEATNESS: Uniform cleaned and pressed? Shoes shined and in good repair? Equipment displayed correctly? Well groomed? Physically clean? Clean shaven, hair cut?
- 2. INITIATIVE: Does the patrolman have to be constantly supervised and told what to do? Does he take correct action to handle police situations? Does he engage in aggressive patrol?
- 3. ABILITY TO LEARN AND APPLY FROM EXPERIENCE: How many times does something have to be explained before he catches on? Does he learn rapidly? Does he profit from experience?
- 4. ATTITUDE TOWARDS THE PUBLIC: Is the patrolman tactful? Is he fair? Is he a gentleman? Respectful? Trustworthy? Does he project a good image and demeanor?
- 5. ATTITUDE TOWARDS FELLOW OFFICERS: Does he get along well with other men in the unit? Does he take orders well? Does he comply cheerfully when ordered to do something? Are the units most effective officers willing to work with this man?
- 6. REPORT WRITING: Are the patrolman's reports legible, complete, prompt, and accurate?
- 7. MAINTENANCE OF EQUIPMENT: Does the patrolman keep his equipment, both personal and Department, in good repair? Clean?
- 8. PUNCTUALITY AND ATTENDANCE: Is the patrolman often late or absent? Can he be depended upon to keep his appointments punctually? Does he utilize all of his time properly?
- 9. SAFETY: Is the patrolman a safe driver? Does he approach offenders safely? Does he handle his weapon safely? Does he observe precautions in maintaining custody of prisoners?

### GUIDANCE SESSION REPORT

The guidance session should not be conducted as an interrogation or lecture. The patrolman should be put at ease and invited to freely discuss and define any problem he may have encountered while making the adjustment to his new police career. Consider the possibility of outside influences, such as personal, domestic, or financial problems. Encourage him to arrive at his own solutions. Would the recruit benefit from a counselling session with the chaplain, a doctor, or a psychiatrist?

Use the Field Evaluation Section as a guide in conducting the guidance sessiom.

#### IMPORTANT

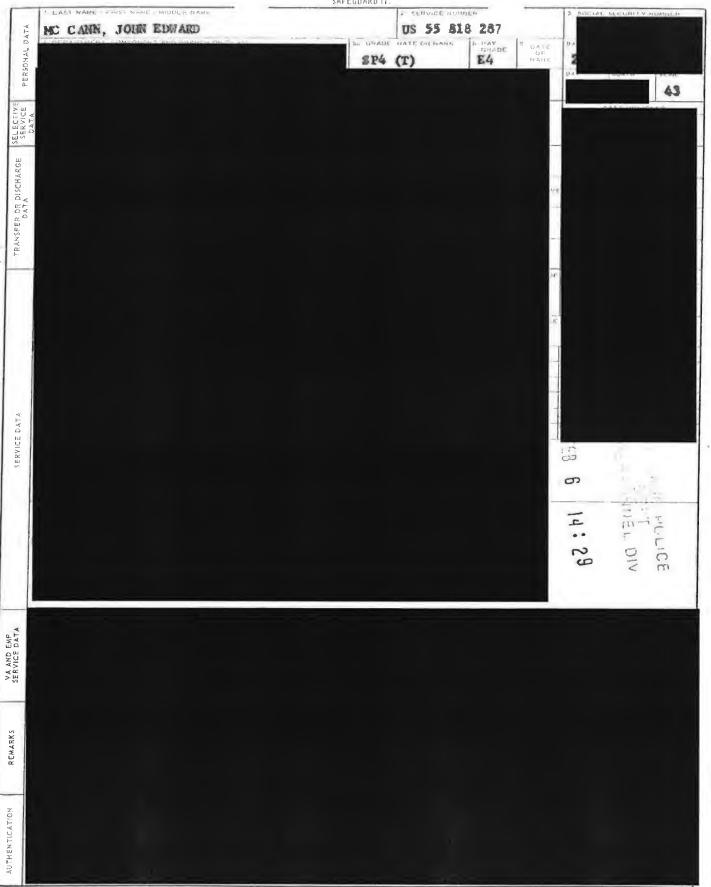
This form should be returned to the Recruit Processing Section before the Date Due in order to ensure that it may be properly reviewed before the end of the probationary period.

	ROBATIONARY PATROL SE REVERSE SIDE FOR EX	MAN'S PERFORMANCE EVALUATION OF TERMS		NATE DUE N RECRUIT Processing:		DATE OF EVALUATION
	Me (LAST) (FIRS	(NE-1+)	5TAR NO. 6250	EMPLOY	DATE	of civil service appointment 14 Sept.1970
DIS	TRICT/UNIT OF ASSIGNMENT	DATE ASSIGNED 16 April 1971	FOR EVAL	uation period en 9 June 1		7th
FIELD EVALUATION	COMPLE I EU BY SUPERVISING SERGEANT)	PERFORMANCE TRAITS  PERSONAL NEATNESS  INITIATIVE  ABILITY TO LEARN AND TO APPLY FROM EXPERIENCE AND TRAINING  ATTITUDE TOWARDS THE PUBLIC  ATTITUDE TOWARDS FELLOW OFFICERS AND SUPERVISORS  REPORT WRITING  MAINTENANCE OF EQUIPMENT  PUNCTUALITY AND ATTENDANCE				
		SAFETY  EFFECTIVENESS IN STREET PATROL	STAR		DATE ALERE 71	FORWARD THIS FORM TO WATCH COMMANDER
GUIDANCE SESSION REPORT		RANK	det.	STAR NO.	DAYE J. Gum	FORWARD THIS FORM TO
(TO BE COMPLETED BY UNIT COMMANDER)	NOTE: IMMEDIATELY NOTIFY TH	PROBATIONARY PATROLMAN BE: [ E recruit processing section of any comi r is involved in any way in an investigati	DISCHARGED PLAINTS, INCIDE ION BY THE INT	ENTS, OR SITUATION	ONS WHERE THE PROBA IS DIVISION.	TIONARY PATROLMAN RECEIVES
		DATE	Sunt	DO YOU WIS	YES	NO

PERSONNEL DIVISION/CHICAGO POLICE AUTHORIZATION FOR RELEASE C. MILITARY & MEDICAL INFORMATION INSTRUCTIONS: Please TYPE or PRINT. APPLICANT: Prepare in duplicate. Complete items No. 1 thru 8. MILITARY BRANCH: Please complete items No. 9 thru 14 and return to V Chicago Police Department, Personnel Division, Recruit Processing Section, 1121 South State Street, Chicago, Illinois 60605. TO: 1. NAME OF APPLICANT John MECANA 45, 555/82871 7 AR 67 NONE MARINE CORP. RESERVE ARMY RESERVE NAVAL RESERVE AIR FORCE RESERVE As an applicant for a position with the Chicago Police Department, I am required to furnish information for use in determining my moral, physical and mental qualifications. In this connection, I authorize release of the information from my military and related medical records. 7 APPLICANT FOR POSITION OF PROBATIONARY PATROLMAN INFORMATION BELOW TO BE FILLED OUT BY MILITARY BRANCH CHARACTER OF SERVICE REASON FOR SEPARATION DATE SEPARATED 9. DATE OF ENTRY Honorable Early separation of overseas re-18 Apr 67 7 May 65 turnees. 10. DISCIPLINARY DATA, IF ANY SEE REMARKS XNONE INCLUDING DISPOSITION SIGNIFICANT ILLNESSES OR SEE ATTACHED DOCUMENTS SEE REMARKS NONE INJURIES, IF ANY PSYCHIATRIC OBSERVATIONS SEE ATTACHED DOCUMENTS SEE REMARKS NONE AND TREATMENT, IF ANY PHYSICAL CONDITION AT TIME REPORT OF SEPARATION PHYSICAL ATTACHED OF SEPARATION 11 BEMARES medical information should be treated as privileged as is customary in civilian 40 professional practice. CONTINUED ON REMERSE SIDE 14. DATE HELEASED 13. RELEASED BY (SIGNATURE) 12 HELEASING OFFICE 4-20-70 G. Contestabile

S. LAST HAME-FIRST HAME-MIDDLE HAME 85-109 2. GRADE AND COMPENENT OR POSITION 4. HOME ADDRESS (Number, street of RFD, city o- town, cone and State) 3. IDENTIFICATION NO. T. MICCORD 4. 10 -14 - 27





\*\* \$380 | 1960 O - 238-125

OPENED SEPTEMBER 1950 PERMANENT RECORD

STATE OF ILLINOIS
COUNTY
CLERK'S
DWIGHT H. GREEN, Governor
RECORD
RECORD
RECORD
REctor

4263

1. PLACE OF BIRTH

I hereby corrected of and filed statutes r